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TO:	FROM:
Mail Stop Amendments Group Art Unit 3762	Jason D. Kelly
COMPANY:	DATE:
U.S. Patent & Trademark Office	AUGUST 1, 2006
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PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	1023-359US01
RE:	APPLICATION SERIAL NUMBER:
Supplemental Information Disclosure Statement	10/826,926

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PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kenneth T. Heruth; Confirmation No. 1025  
Keith A. Miesel  
Serial No.: 10/826,926  
Filed: April 15, 2004 Customer No.: 28863  
Examiner: Unknown  
Group Art Unit: 3762 Docket No.: 1023-359US01  
Title: COLLECTING POSTURE INFORMATION TO EVALUATE THERAPY

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CERTIFICATE UNDER 37 CFR 1.8 I hereby certify that this correspondence is being transmitted via facsimile to the United States Patent and Trademark Office on August 1, 2006.

By: Shirley A. Betlach  
Name: Shirley A. Betlach

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendments  
Commissioner for Patents  
Alexandria, VA 22313-1450

Dear Sir:

Applicant submits the references listed on the attached form PTO-1449. This statement is being filed, to the best of Applicant's knowledge, before the receipt of a first Office Action on the merits.

Copies of the U.S. patents and publications are not enclosed as this requirement has been waived by the U.S. Patent Office.

Respectfully submitted,

Date: 8/1/06

Jason D. Kelly  
By: Jason D. Kelly  
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Date Mailed: August 1, 2006

Page 1 of 1

<b>Form 1449*</b>		<b>Docket Number:</b> 1023-359US01		<b>Application Number:</b> 10/826,926	
<b>INFORMATION DISCLOSURE STATEMENT</b>  <b>IN AN APPLICATION</b>  (Use several sheets if necessary)		<b>Applicant:</b> Kenneth T. Heruth; Keith A. Miesel			
		<b>Filing Date:</b> April 15, 2004		<b>Group Art Unit:</b> 3762	
		<b>Examiner Name:</b> Unknown			
<b>U.S. PATENT DOCUMENTS</b>					
<b>Examiner Initial</b>	<b>Document Number</b>	<b>Issue/Document Publication Date</b>	<b>Name</b>	<b>Filing Date If Appropriate</b>	
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<b>FOREIGN PATENT DOCUMENTS</b>					
<b>Examiner Initial</b>	<b>Document Number</b>	<b>Publication Date</b>	<b>Country</b>	<b>Translation</b>	
				<b>Yes</b>	<b>No</b>
<b>OTHER DOCUMENTS (Including Authors, Title of Item, Page(s), Vol/Issue No., Publisher, Place of Publication)</b>					
<b>EXAMINER</b>			<b>Date Considered</b>		

\*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Based on Form PTO-FB-A820  
(Also form PTO-1449)

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